



**Testimony of Deborah Kelleher
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***H.B. No. 7027 AN ACT CONCERNING THE STATE BUDGET FOR THE BIENNIUM ENDING JUNE THIRTIETH 2019, AND MAKING APPROPRIATIONS THEREFOR.**

*February 23 2017 Appropriations Subcommittee on Health Public Hearing
Department of Mental Health & Addiction Services, Regional Action Council Funding*

Senator Osten, Senator Formica, Representative Walker, Senator Gerratana, Senator Markley, Representative Dillon and members of the Appropriations Subcommittee, my name is Deb Kelleher and I am a member of the Central Naugatuck Valley Regional Action Council (CNVRAC). I am here today both as a member of the CNVRAC, but more importantly as a parent of teenagers and a Cheshire voter to strongly oppose the grave cuts to regional action councils that will decimate the current prevention network structure.

The CNVRAC serves the region I reside in. I have chosen to join the RAC as both a concerned parent and in my professional capacity serving the needs of foster and adopted children in our region. My Regional Action Council's budget of \$189K (inclusive of a few small non-state grants) provides incredible "bang for the buck." It is unlikely that this could be duplicated anywhere else in state services for less.

The RACs provide many necessary services in our local communities. They develop and coordinate substance abuse prevention and mental health promotion services, across the state, locally, and for my region in Northwestern CT. How does my RAC do this?

The CNVRAC serves as the Strategic Community Partner to link state substance abuse prevention, mental health promotion and related priorities to local and regional initiatives.

CNVRAC staff regularly provide training and technical assistance to Local Prevention Councils (LPCs), so they use the Strategic Prevention Framework (best practice) to guide their work, and develop long term plans. Prior to 2009, no communities in the CNVRAC service area collected town level youth risk behavior data on substance use consumption, consequence, or related behaviors.

Through Partnership for Success funds and CNVRAC support, the RAC has been able to encourage the use of the Search Institute Youth Attitudes and Behaviors Survey, by each school district within the service area. Not only has the RAC been successful in building these local-level partnerships for the

purpose of youth risk behavior data collection, but it has also been able to sustain collaborative relationships beyond the dollars associated with the cost of the initial survey administration.

CNVRAC works with local-level partners including but not limited to LPCs, to conduct systemic Youth Retreats to analyze their survey results, to prioritize findings, and to identify directions for next steps and action plans for change. Since 2009, more than 10,231 first-time surveys have been administered across sub-region 5B. And to date, four of 12 towns have conducted multiple data collections, and three more are slated for subsequent spring data collections this year alone.

CNVRAC administers the LPC contracts to 12 communities in Northwestern sub-region 5B of CT. CNVRAC also provides training and technical assistance to LPC members and their audiences. The RAC staff attend LPC meetings and assist in coordinating efforts among the LPCs to use funding efficiently across the service area. Youth Surveys, Data Collection and Resource Directories are updated on an on-going basis. Staff also use partnerships in the community and through the LPCs to stay informed of new resources and emerging needs. CNVRAC's LPCs and multiple committees annually contribute to an overall needs assessment, which identifies gaps in the service continuum as well as recommendations driven by local service providers, consumers, professionals, and others to narrow or eliminate these gaps and/or to alter the environments in which they occur.

CNVRAC annually convenes sector focus groups and community needs assessment workgroup (CNAW) members in collaboration with HVCASA and the Northwestern Regional Mental Health Board.

Prevention, which is key to reducing the tragedy of opioid addiction and overdose, is the main reason the RACs exist. And as you can see from the information above, regionally, our communities all benefit from the work of our RAC in many ways, not the least of which is opioid abuse prevention. And while it may appear that my town, Cheshire, is somewhat insulated from this epidemic, we know that this is not the case, based on data for surrounding communities, and at least 2 recent deaths (awaiting official confirmation by the CME's office) of young people whose deaths are related to opioid addiction and who were known by my own children. Further, we know that while education and other prevention efforts may fall within a school zone or town line, we also know that addiction knows no boundaries and does not discriminate. It affects every family in every community regardless of the color of your skin, the amount of money in your wallet, or the street that you live on. My child's grief over the loss of friends and the grief of the families who have so cruelly lost their children is evidence of that.

Opioid addiction - and the need for treatment - is on the rise as indicated by the table below. This includes my town.

Table 1: Unduplicated Clients by Town						
RAC	Towns	2011	2012	2013	2014	2015
CNVRAC	Beacon Falls	18	25	24	23	27
CNVRAC	Bethlehem	9	7	6	6	8
CNVRAC	Cheshire	11	19	38	26	30
CNVRAC	Middlebury	10	12	14	15	19
CNVRAC	Naugatuck	106	111	135	124	150
CNVRAC	Prospect	18	22	20	19	24
CNVRAC	Southbury	23	31	22	34	26
CNVRAC	Thomaston	14	18	21	20	32
CNVRAC	Waterbury	577	669	689	648	779
CNVRAC	Watertown	59	56	71	67	79
CNVRAC	Wolcott	42	40	57	52	58
CNVRAC	Woodbury	14	6	14	13	14

How do we as a state respond to the tragedy of addiction? Educating our children when they are small and impressionable is worthy of our time and our money. "If effective prevention programs were implemented nationwide, substance abuse initiation would decline for 1.5 million youth and be delayed for 2 years on average. It has been well established that a delay in onset reduces subsequent problems later in life... Programs could save an estimated \$18 per \$1 invested if implemented nationwide."ⁱ Certainly, removing all prevention efforts from state budgets will do nothing to help avoid further loss of life. Our children deserve better. Please remember them – and their futures - when making difficult decisions during this difficult budget season.

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ⁱ <http://store.samhsa.gov/shin/content//SMA07-4298/SMA07-4298.pdf>